

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAY -8 PM 3: 28

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # z00301

CARNICON-VENEZUELA HOTEL CONSULTANTS, L.C.
3250 MARY STREET
SUITE 500
MIAMI FL 33133

1a. Principal Place of Business Address
3250 MARY STREET
SUITE 500
MIAMI FL 33133

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10/01/1990	FL
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country	65-0252096	5. Date of Last Report
				04/03/1997	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent
PELTZ, ARVIN, ESQ.
3250 MARY ST.
SUITE 500
MIAMI FL 33133

8. Name and Address of New Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
Zip Code
500002522575--1
-05/14/98--01002--018
******188.75 ****188.75**
FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	CSMC MANAGEMENT SERV,	3250 MARY ST., STE. 500	MIAMI FL
MGR	STURGES, ROBERT	3250 MARY ST., STE. 500	MIAMI FL
MGR	WEISER, SHERWOOD	3250 MARY ST., STE. 500	MIAMI FL
MGR	LEFTON, DONALD	3250 MARY ST., STE. 500	MIAMI FL
MGR	TEMLING W. PETER,	3250 MARY ST., STE. 500	MIAMI FL
MGR	HEWITT, THOMAS F	3250 MARY ST., STE 500	MIAMI FL

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: *W. Peter Temling* W. PETER TEMLING 4/14/98 305-445-2493
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Day: inc Phone #